

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

**NORTHERN DISTRICT OF TEXAS**

Case number (if known): \_\_\_\_\_

Chapter you are filing under:

- Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an  
amended filing

**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

**Shabrena**

First Name

First Name

**Lavet**

Middle Name

Middle Name

**Lynch**

Last Name

Last Name

Suffix (Sr., Jr., II, III)

Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

**Shabrena**

First Name

First Name

Middle Name

Middle Name

**Penninger**

Last Name

Last Name

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**xxx - xx - 3 9 8 1

OR

9xx - xx - \_\_\_\_\_

xxx - xx - \_\_\_\_\_

OR

9xx - xx - \_\_\_\_\_

Debtor 1	<b>Shabrena Lave Lynch</b>	Case number (if known)
<b>About Debtor 1:</b>		
<p><b>4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</b></p> <p>Include trade names and doing business as names</p>		
<p><input checked="" type="checkbox"/> I have not used any business names or EINs. <input type="checkbox"/> I have not used any business names or EINs.</p> <p>Business name _____ Business name _____</p> <p>Business name _____ Business name _____</p> <p>Business name _____ Business name _____</p> <p>EIN _____ EIN _____</p> <p>EIN _____ EIN _____</p>		
<p><b>5. Where you live</b></p> <p><b>4437 Longmeadow Way</b> Number Street _____ _____ _____</p> <p><b>Ft Worth TX 76133</b> City State ZIP Code <b>Tarrant</b> County</p> <p>If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.</p> <p>Number Street _____ P.O. Box _____ City State ZIP Code</p> <p>Number Street _____ P.O. Box _____ City State ZIP Code</p>		
<p><b>6. Why you are choosing this district to file for bankruptcy</b></p> <p>Check one:</p> <p><input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)</p> <p><input type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)</p>		

## Part 2: Tell the Court About Your Bankruptcy Case

<b>7. The chapter of the Bankruptcy Code you are choosing to file under</b>	<i>Check one:</i> (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.
	<p><input checked="" type="checkbox"/> Chapter 7</p> <p><input type="checkbox"/> Chapter 11</p> <p><input type="checkbox"/> Chapter 12</p> <p><input type="checkbox"/> Chapter 13</p>

Debtor 1 Shabrena Lave Lynch Case number (if known) \_\_\_\_\_

## 8. How you will pay the fee

- I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

## 9. Have you filed for bankruptcy within the last 8 years?

- No
- Yes.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYYDistrict \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYYDistrict \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

## 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- No
- Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
MM / DD / YYYY if known

## 11. Do you rent your residence?

- No. Go to line 12.
- Yes. Has your landlord obtained an eviction judgment against you?

- No. Go to line 12.
- Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Shabrena Lavet Lynch**

Case number (if known)

### Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

- No. Go to Part 4.  
 Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

---

Name of business, if any

---

Number Street

---

City

State

---

ZIP Code

*Check the appropriate box to describe your business:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
  - Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
  - Stockbroker (as defined in 11 U.S.C. § 101(53A))
  - Commodity Broker (as defined in 11 U.S.C. § 101(6))
  - None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

- No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

- No  
 Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

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City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor 1 **Shabrena Lavey Lynch**

Case number (if known) \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling****15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:***You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):***You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?
- 16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- No. Go to line 16b.  
 Yes. Go to line 17.
- 16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- No. Go to line 16c.  
 Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.
- 
17. Are you filing under Chapter 7?
- Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?
- No. I am not filing under Chapter 7. Go to line 18.  
 Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- No  
 Yes
18. How many creditors do you estimate that you owe?
- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |
19. How much do you estimate your assets to be worth?
- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000      | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000     | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million   | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |
20. How much do you estimate your liabilities to be?
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

Debtor 1 Shabrena Lavet Lynch Case number (if known) \_\_\_\_\_**Part 7: Sign Below****For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Shabrena Lavet Lynch**

Shabrena Lavet Lynch, Debtor 1

**X**

Signature of Debtor 2

Executed on 09/27/2019

MM / DD / YYYY

Executed on

MM / DD / YYYY

Debtor 1 Shabrena Lavey Lynch Case number (if known) \_\_\_\_\_**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**X /s/ Mark S Rubin / Kelli L Johnson**

Signature of Attorney for Debtor

Date 09/27/2019  
MM / DD / YYYY**Mark S Rubin / Kelli L Johnson**

Printed name

**Rubin & Associates PC**

Firm Name

**13601 Preston Rd**

Number Street

**Suite 500E****Dallas**

City

**TX**

State

**75240**

ZIP Code

Contact phone (214) 760-7777

Email address \_\_\_\_\_

**17361550/24053317**

Bar number

State \_\_\_\_\_

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

In re **Shabrena Lavey Lynch**

Case No. \_\_\_\_\_

Chapter 7 \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u><b>\$2,000.00</b></u>
Prior to the filing of this statement I have received.....	<u><b>\$2,000.00</b></u>
Balance Due.....	<u><b>\$0.00</b></u>

2. The source of the compensation paid to me was:

Debtor       Other (specify)

3. The source of compensation to be paid to me is:

Debtor       Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

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**09/27/2019**

*Date*

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**/s/ Mark S Rubin / Kelli L Johnson**

*Mark S Rubin / Kelli L Johnson*

*Rubin & Associates PC*

*13601 Preston Rd*

*Suite 500E*

*Dallas TX 75240*

*Phone: (214) 760-7777 / Fax: (214) 760-9100*

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*Bar No. 17361550/2405331*

**Fill in this information to identify your case and this filing:**

Debtor 1	<u>Shabrena</u>	<u>Lavet</u>	<u>Lynch</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106A/B****Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.  
 Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... → \$0.00

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No  
 Yes

3.1.

Make: Infiniti  
 Model: G35  
 Year: 2006  
 Approximate mileage: 186,000

Other information:

**2006 Infiniti G35 (approx. 186,000 miles)**

**Who has an interest in the property?**

Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?      Current value of the portion you own?**

\$1,675.00      \$1,675.00

Check if this is community property  
(see instructions)

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....****\$1,675.00****Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware

- No  
 Yes. Describe.....

**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No  
 Yes. Describe.....

**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No  
 Yes. Describe.....

**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No  
 Yes. Describe.....

**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

- No  
 Yes. Describe.....

**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- No  
 Yes. Describe.....

**Clothing & Accessories****\$600.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- No  
 Yes. Describe.....

**Jewelry****\$10.00**

Debtor 1 Shabrena Lavey Lynch Case number (if known) \_\_\_\_\_**13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe.....

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**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....

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**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....****\$610.00****Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes..... Cash: .....**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes..... Institution name:

17.1. Checking account:	<b>Chase 6658 Checking account</b>	<b>(\$13.00)</b>
17.2. Checking account:	<b>Navy FCU 0631 Checking account</b>	<b>\$0.00</b>
17.3. Savings account:	<b>Navy FCU 1400 Savings account</b>	<b>\$0.00</b>

**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes..... Institution or issuer name:**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them.....

Name of entity:

% of ownership:

Debtor 1 Shabrena Lavey Lynch Case number (if known) \_\_\_\_\_**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

- No  
 Yes. Give specific information about them..... Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- No  
 Yes. List each account separately. Type of account: Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- No  
 Yes..... Institution name or individual:

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)

- No  
 Yes..... Issuer name and description:

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- No  
 Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- No  
 Yes. Give specific information about them \_\_\_\_\_

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

- No  
 Yes. Give specific information about them \_\_\_\_\_

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- No  
 Yes. Give specific information about them \_\_\_\_\_

**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

- No  
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \_\_\_\_\_

State: \_\_\_\_\_

Local: \_\_\_\_\_

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information

Alimony: \_\_\_\_\_

Maintenance: \_\_\_\_\_

Support: \_\_\_\_\_

Divorce settlement: \_\_\_\_\_

Property settlement: \_\_\_\_\_

**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information
**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

 No Yes. Give specific information
**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim.....
**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....
**35. Any financial assets you did not already list** No Yes. Give specific information
**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

(\$13.00)

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.

Debtor 1 Shabrena Lavet Lynch Case number (if known) \_\_\_\_\_

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

- No  
 Yes. Describe..

**39. Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- No  
 Yes. Describe..

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- No  
 Yes. Describe..

**41. Inventory**

- No  
 Yes. Describe..

**42. Interests in partnerships or joint ventures**

- No  
 Yes. Describe..... Name of entity:

% of ownership:

**43. Customer lists, mailing lists, or other compilations**

- No  
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
 No  
 Yes. Describe.....

**44. Any business-related property you did not already list**

- No  
 Yes. Give specific information.

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....**

\$0.00

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
**If you own or have an interest in farmland, list it in Part 1.**

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- No. Go to Part 7.  
 Yes. Go to line 47.

Debtor 1 Shabrena Lave Lynch Case number (if known) \_\_\_\_\_

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**47. Farm animals***Examples:* Livestock, poultry, farm-raised fish

No  
 Yes....

--	--

**48. Crops--either growing or harvested**

No  
 Yes. Give specific information.....

--	--

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

No  
 Yes....

--	--

**50. Farm and fishing supplies, chemicals, and feed**

No  
 Yes....

--	--

**51. Any farm- and commercial fishing-related property you did not already list**

No  
 Yes. Give specific information.....

--	--

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....**

\$0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?***Examples:* Season tickets, country club membership

No  
 Yes. Give specific information.

**54. Add the dollar value of all of your entries from Part 7. Write that number here.....**

\$0.00

Debtor 1 Shabrena Lavet Lynch Case number (if known) \_\_\_\_\_**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....	→	\$0.00	
56. Part 2: Total vehicles, line 5		<u>\$1,675.00</u>	
57. Part 3: Total personal and household items, line 15		<u>\$610.00</u>	
58. Part 4: Total financial assets, line 36		<u>(\$13.00)</u>	
59. Part 5: Total business-related property, line 45		<u>\$0.00</u>	
60. Part 6: Total farm- and fishing-related property, line 52		<u>\$0.00</u>	
61. Part 7: Total other property not listed, line 54	+	<u>\$0.00</u>	
62. Total personal property. Add lines 56 through 61.....		<u>\$2,272.00</u>	Copy personal property total → + <u>\$2,272.00</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		<u>\$2,272.00</u>	

## Fill in this information to identify your case:

Debtor 1	Shabrena	Lavet	Lynch
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known) _____			

Check if this is an amended filing

## Official Form 106C

**Schedule C: The Property You Claim as Exempt**

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
--	--------------------------------------	-----------------------------------	------------------------------------

Brief description: *Copy the value from Schedule A/B* *Check only one box for each exemption*

**2006 Infiniti G35 (approx. 186,000 miles)** **\$1,675.00** **\$1,675.00** **11 U.S.C. § 522(d)(2)**

**(1st exemption claimed for this asset)**

Line from *Schedule A/B*: 3.1

- 100% of fair market value, up to any applicable statutory limit

**2006 Infiniti G35 (approx. 186,000 miles)** **\$1,675.00** **\$0.00** **11 U.S.C. § 522(d)(5)**

**(2nd exemption claimed for this asset)**

Line from *Schedule A/B*: 3.1

- 100% of fair market value, up to any applicable statutory limit

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Debtor 1 Shabrena Lavey Lynch Case number (if known) \_\_\_\_\_**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption	
Brief description: <b>Clothing &amp; Accessories</b> <b>(1st exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>11</u>	<u>\$600.00</u>	<input checked="" type="checkbox"/> <u>\$600.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Brief description: <b>Clothing &amp; Accessories</b> <b>(2nd exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>11</u>	<u>\$600.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>Jewelry</b> <b>(1st exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>12</u>	<u>\$10.00</u>	<input checked="" type="checkbox"/> <u>\$10.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(4)</b>
Brief description: <b>Jewelry</b> <b>(2nd exemption claimed for this asset)</b> Line from <i>Schedule A/B</i> : <u>12</u>	<u>\$10.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>Chase 6658 Checking account</b> Line from <i>Schedule A/B</i> : <u>17.1</u>	<u>(\$13.00)</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>Navy FCU 0631 Checking account</b> Line from <i>Schedule A/B</i> : <u>17.2</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Brief description: <b>Navy FCU 1400 Savings account</b> Line from <i>Schedule A/B</i> : <u>17.3</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

IN RE: **Shabrena Lavey Lynch**

CASE NO

CHAPTER **7**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$1,675.00	\$0.00	\$1,675.00	\$1,675.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
7.	Electronics	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$600.00	\$0.00	\$600.00	\$600.00	\$0.00
12.	Jewelry	\$10.00	\$0.00	\$10.00	\$10.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household items- incl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17.	Deposits of money	(\$13.00)	\$0.00	\$0.00	\$0.00	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

IN RE: **Shabrena Lave Lynch**

CASE NO

CHAPTER **7**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

Continuation Sheet # 1

**Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **Federal**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops--either growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTALS:</b>		<b>\$2,272.00</b>	<b>\$0.00</b>	<b>\$2,285.00</b>	<b>\$2,285.00</b>	<b>\$0.00</b>

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION**

IN RE: **Shabrena Lavey Lynch**

CASE NO

CHAPTER **7**

**SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)**

Continuation Sheet # 2

**Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity
<b>Real Property</b>			
(None)			
<b>Personal Property</b>			
(None)			
<b>TOTALS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Non-Exempt Property by Item:**

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
<b>Real Property</b>				
(None)				
<b>Personal Property</b>				
(None)				
<b>TOTALS:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

<b>Summary</b>	
A. Gross Property Value (not including surrendered property)	<b>\$2,272.00</b>
B. Gross Property Value of Surrendered Property	<b>\$0.00</b>
C. Total Gross Property Value (A+B)	<b>\$2,272.00</b>
D. Gross Amount of Encumbrances (not including surrendered property)	<b>\$0.00</b>
E. Gross Amount of Encumbrances on Surrendered Property	<b>\$0.00</b>
F. Total Gross Encumbrances (D+E)	<b>\$0.00</b>
G. Total Equity (not including surrendered property) / (A-D)	<b>\$2,285.00</b>
H. Total Equity in surrendered items (B-E)	<b>\$0.00</b>
I. Total Equity (C-F)	<b>\$2,285.00</b>
J. Total Exemptions Claimed (Wild Card Used: \$0.00, Available: \$13,900.00)	<b>\$2,285.00</b>
K. Total Non-Exempt Property Remaining (G-J)	<b>\$0.00</b>

**Fill in this information to identify your case:**

Debtor 1	Shabrena	Lavet	Lynch
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

- 2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
---	--	--

2.1

**Describe the property that  
secures the claim:**

Creditor's name \_\_\_\_\_

Number Street \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Who owes the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 **Check if this claim relates  
to a community debt****Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$0.00**

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

**\$0.00**

## Fill in this information to identify your case:

Debtor 1	Shabrena	Lavet	Lynch
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

Check if this is an amended filing

## Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

	Total claim	Priority amount	Nonpriority amount
--	-------------	-----------------	--------------------

2.1	_____	_____	_____
Priority Creditor's Name	Last 4 digits of account number		
Number Street	When was the debt incurred?		
City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.
Who incurred the debt? Check one.		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Type of PRIORITY unsecured claim:			
<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
Is the claim subject to offset?			
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">4.1</div> <b>ATandT Bankruptcy</b> Nonpriority Creditor's Name <b>1801 Valley View Ln</b> Number Street <hr/> <b>Farmers Branch</b> TX      75234 City      State      ZIP Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>6 0 9 5</u> When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection</b>
<b>\$537.00</b>	
4.2	
<b>ATandT Uverse</b> Nonpriority Creditor's Name <b>PO Box 5014</b> Number Street <b>Carol Stream IL 60197 5014</b> <hr/> <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3 0 0 1</u> When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection</b>
<b>\$70.00</b>	

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**4.3 \$129.00**Belk Synchrony Bankruptcy**

Nonpriority Creditor's Name

**PO Box 965060**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Orlando FL 32896**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Credit Card**

**\$2,020.00****Capital One Bankruptcy**

Nonpriority Creditor's Name

**PO Box 71083**

Number Street

Last 4 digits of account number 0 2 9 3

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Charlotte NC 28272**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Credit Card**

**\$693.00****Capital One Bankruptcy**

Nonpriority Creditor's Name

**PO Box 71083**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Charlotte NC 28272**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Credit Card**

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**4.6 \$1,021.00**Capital One Bankruptcy**

Nonpriority Creditor's Name

**PO Box 71083**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Charlotte NC 28272**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Credit Card**

4.7 \$87.00**CoServ Gas**

Nonpriority Creditor's Name

**co Revenue Recovery**

Number Street

**7701 South Stemmons Fwy**Last 4 digits of account number 0 1 6 0

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Corinth TX 76210**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Services**

4.8 \$553.00**Direct TV Bankruptcy Dept**

Nonpriority Creditor's Name

**PO Box 6550**

Number Street

Last 4 digits of account number 3 8 1 0

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Greenwood Village CO 80155**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Services**

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**4.9 **\$287.00****Envision Imaging of Frisco**

Nonpriority Creditor's Name

**PO Box 974744**

Number Street

**Dallas TX 75397**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Last 4 digits of account number** \_\_\_\_\_**When was the debt incurred?** \_\_\_\_\_**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical**

4.10

**\$621.00****Firewheel Modern Dentistry**

Nonpriority Creditor's Name

**5129 N Garland Ave Suite 700**

Number Street

**Garland TX 75040**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Last 4 digits of account number** 3 0 7 7**When was the debt incurred?** \_\_\_\_\_**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Dental**

4.11

**\$510.00****First Choice Emergency Room**

Nonpriority Creditor's Name

**PO Box 841047**

Number Street

**Dallas TX 75284**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Last 4 digits of account number** u n t s**When was the debt incurred?** \_\_\_\_\_**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical**

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.12****\$20,406.00****Flagship Credit Acceptance**

Nonpriority Creditor's Name

**PO Box 3807**

Number Street

Last 4 digits of account number 4 9 1 5

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Coppell TX 75019**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collection**

**4.13****\$193.00****Grande Communications**

Nonpriority Creditor's Name

**7701 S Stemmons**

Number Street

Last 4 digits of account number 7 1 0 6

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Corinth TX 76210**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collection**

**4.14****\$370.00****Kohls Bankruptcy**

Nonpriority Creditor's Name

**PO Box 3004**

Number Street

**Milwaukee WI 53201 3004**Last 4 digits of account number 5 6 9 3

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**City State ZIP Code****Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Credit Card**

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.15****\$115.00**

**Labcorp Attn Special Operations**  
 Nonpriority Creditor's Name  
**1250 Chapel Hill Rd**  
 Number Street

Last 4 digits of account number 7 8 3 1

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Burlington NC 27217**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical**

**4.16****\$2,265.00**

**LendMark Financial Services**  
 Nonpriority Creditor's Name  
**2118 Usher St NW**  
 Number Street

Last 4 digits of account number 0 0 0 2

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Covington GA 30014**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Collection**

**4.17****\$1,213.00**

**MobiLoans**  
 Nonpriority Creditor's Name  
**151 Melacon Rd**  
 Number Street

Last 4 digits of account number 3 2 8 9

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Marksville LA 71351**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Payday Loan**

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.18****\$354.00****Nationwide Insurance**

Nonpriority Creditor's Name

**1 Nationwide Plaza**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Columbus OH 43215**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Insurance**

**4.19****\$54,580.00****Navient Correspondence**

Nonpriority Creditor's Name

**PO Box 9500**

Number Street

**WilkesBarre PA 18773 9500**Last 4 digits of account number 8 2 5 9

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**City State ZIP Code**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

**4.20****\$3,173.00****NTTA**

Nonpriority Creditor's Name

**5900 W Plano Pkwy Suite 200**

Number Street

Last 4 digits of account number u n t s

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Plano TX 75093**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Toll Fees**

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.21****\$759.00****Progressive Leasing**

Nonpriority Creditor's Name

**256 W Data Dr**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Draper UT 84020**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collection**

**4.22****\$199.00****Quest Diagnostics Correspondence**

Nonpriority Creditor's Name

**PO Box 3077**

Number Street

Last 4 digits of account number u n t s

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Southeastern PA 19398**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical**

**4.23****\$1,160.00****Republic Bank and Trust**

Nonpriority Creditor's Name

**601 W Market St**

Number Street

**Louisville KY 40202 2700**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**City State ZIP Code****Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Collection**

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.24****\$13,957.00****Santander Consumer USA Inc Bankruptcy**

Nonpriority Creditor's Name

**PO Box 560284**

Number Street

**Dallas TX 75356 0284**Last 4 digits of account number 1 8 3 7

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Repossession**

**Is the claim subject to offset?**

- No  
 Yes

**4.25****\$898.00****Speedy Cash**

Nonpriority Creditor's Name

**7330 W 33rd St N Suite 118**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Wichita** State **KS** ZIP Code **67205****Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Payday Loan**

**Is the claim subject to offset?**

- No  
 Yes

**4.26****\$400.00****Texas Health Business Office**

Nonpriority Creditor's Name

**500 E Border St Suite 131**

Number Street

Last 4 digits of account number u n t s

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Arlington** State **TX** ZIP Code **76010****Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Medical**

**Is the claim subject to offset?**

- No  
 Yes

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.27****\$161.00****Texas Health Physicians Group**

Nonpriority Creditor's Name

**PO Box 732262**

Number Street

**Dallas TX 75373 2262**Last 4 digits of account number       u      n      t      s

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical**

**4.28****\$87.00****Texas Health Resources**

Nonpriority Creditor's Name

**500 E Border St 12th Floor**

Number Street

Last 4 digits of account number       2      6      5      6

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City **Arlington** State **TX** ZIP Code **76010**

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical**

**4.29****\$115.00****Texas Medicine Resources**

Nonpriority Creditor's Name

**PO Box 8549**

Number Street

**Ft Worth TX 76124 0549**Last 4 digits of account number       —      —      —

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical**

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

**Total claim****4.30****\$140.00****Town of Little Elm Water**

Nonpriority Creditor's Name

**100 W Eldorado Pkwy**

Number Street

Last 4 digits of account number 1 4 0 1

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Little Elm TX 75068**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Property Taxes**

Is the claim subject to offset?

- No  
 Yes

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

<b>AMCA</b> Name <b>PO Box 1235</b> Number Street <b>Elmsford NY 10523 0935</b>	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line <u>4.15</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City _____ State _____ ZIP Code _____	
<b>AMCOL Systems</b> Name <b>PO Box 21625</b> Number Street	
	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line <u>4.26</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City <b>Columbia</b> State <b>SC</b> ZIP Code <b>29221</b>	
<b>AMCOL Systems</b> Name <b>PO Box 21625</b> Number Street	
	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line <u>4.11</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City <b>Columbia</b> State <b>SC</b> ZIP Code <b>29221</b>	
<b>Cascade Receivables Mgmt</b> Name <b>1670 Corporate Cir Suite 202</b> Number Street	
	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line <u>4.24</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City <b>Petaluma</b> State <b>CA</b> ZIP Code <b>94954</b>	
<b>Commonwealth Financial Systems</b> Name <b>245 Main St</b> Number Street	
	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line <u>4.28</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City <b>Dickson City</b> State <b>PA</b> ZIP Code <b>18519</b>	

Debtor 1 Shabrena Lavey Lynch Case number (if known) \_\_\_\_\_**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

<b>Computer Credit Inc</b>	On which entry in Part 1 or Part 2 did you list the original creditor?
Name <b>PO Box 5238</b>	Line <u>4.26</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims
Number Street <b>WinstonSalem NC 27113 5238</b>	<input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City _____	State _____ ZIP Code _____
<b>Credence Resource Management LLC</b> On which entry in Part 1 or Part 2 did you list the original creditor?	
Name <b>PO Box 2238</b>	Line <u>4.8</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims
Number Street <b>Southgate MI 48195</b>	<input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City _____	State _____ ZIP Code _____
<b>Credit Collection Service</b> On which entry in Part 1 or Part 2 did you list the original creditor?	
Name <b>PO Box 9133</b>	Line <u>4.22</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims
Number Street <b>Needham MA 02494 9133</b>	<input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City _____	State _____ ZIP Code _____
<b>Credit Collection Services</b> On which entry in Part 1 or Part 2 did you list the original creditor?	
Name <b>725 Canton St</b>	Line <u>4.22</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims
Number Street <b>Norwood MA 02062</b>	<input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City _____	State _____ ZIP Code _____
<b>Credit Collection Services</b> On which entry in Part 1 or Part 2 did you list the original creditor?	
Name <b>725 Canton St</b>	Line <u>4.18</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims
Number Street <b>Norwood MA 02062</b>	<input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City _____	State _____ ZIP Code _____
<b>Credit Service Co</b> On which entry in Part 1 or Part 2 did you list the original creditor?	
Name <b>PO Box 1120</b>	Line <u>4.9</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims
Number Street <b>Colorado Springs CO 80901</b>	<input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number _____	
City _____	State _____ ZIP Code _____

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****Credit Systems International Inc**Name  
**1277 Country Club Ln**  
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.29 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured ClaimsCity **Ft Worth** State **TX** ZIP Code **76112**

Last 4 digits of account number \_\_\_\_\_

**Credit Systems International Inc**Name  
**1277 Country Club Ln**  
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.27 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured ClaimsCity **Ft Worth** State **TX** ZIP Code **76112**

Last 4 digits of account number \_\_\_\_\_

**Diversified Consultants Inc**Name  
**PO Box 551268**  
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured ClaimsCity **Jacksonville** State **FL** ZIP Code **32255**

Last 4 digits of account number \_\_\_\_\_

**Enhanced Recovery Company LLC**Name  
**PO Box 57547**  
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured ClaimsCity **Jacksonville** State **FL** ZIP Code **32241**

Last 4 digits of account number \_\_\_\_\_

**Global Trust Mgmt**Name  
**PO Box 26244**  
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.17 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured ClaimsCity **Tampa** State **FL** ZIP Code **33622**

Last 4 digits of account number \_\_\_\_\_

**IC Systems Collections**Name  
**PO Box 64378**  
Number Street  
**St Paul MN 55164 0378**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page****IC Systems Collections**Name  
**PO Box 64378**  
Number Street  
**St Paul MN 55164 0378**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**NCB Management**Name  
**One Allied Drive**  
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.23 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

City **Trevose** State **PA** ZIP Code **19053****Pacific Dental Services**Name  
**17000 Red Hill Ave**  
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

City **Irvine** State **CA** ZIP Code **92614****Phillips and Cohen Associates Ltd**Name  
**1004 Justison St**  
Number Street  
**Mail Stop 658**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

City **Wilmington DE 19801 5148****Phillips and Cohen Associates Ltd**Name  
**1004 Justison St**  
Number Street  
**Mail Stop 658**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

City **Wilmington DE 19801 5148****PMT Solutions**Name  
**2330 130th Ave NE Suite C101**  
Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.20 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

City **Bellevue** State **WA** ZIP Code **98005**

Debtor 1 Shabrena Lavet Lynch Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Professional Account Management LLC** On which entry in Part 1 or Part 2 did you list the original creditor?  
 Name \_\_\_\_\_  
**PO Box 866608** Line 4.20 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Number Street  Part 2: Creditors with Nonpriority Unsecured Claims  
 \_\_\_\_\_  
 \_\_\_\_\_  
**Plano** Last 4 digits of account number \_\_\_\_\_  
 City TX 75086 State ZIP Code

Debtor 1 Shabrena Lavey Lynch Case number (if known) \_\_\_\_\_**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
<b>Total claims from Part 1</b>	
6a. Domestic support obligations	6a. <u>\$0.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	<u>\$0.00</u>

	Total claim
<b>Total claims from Part 2</b>	
6f. Student loans	6f. <u>\$54,580.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$52,493.00</u>
6j. Total. Add lines 6f through 6i.	<u>\$107,073.00</u>

**Fill in this information to identify your case:**

Debtor 1	<u>Shabrena</u>	<u>Lavet</u>	<u>Lynch</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.****Person or company with whom you have the contract or lease****State what the contract or lease is for**

Fill in this information to identify your case:			
Debtor 1	Shabrena	Lavet	Lynch
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)
 

No  
 Yes
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)
 

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 

No  
 Yes
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:



Debtor 1	Shabrena Lavet Lynch	Case number (if known)	
		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here .....	→ 4.	\$0.00	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00	
5e. Insurance	5e.	\$0.00	
5f. Domestic support obligations	5f.	\$0.00	
5g. Union dues	5g.	\$0.00	
5h. Other deductions. Specify: _____	5h. +	\$0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	
8b. Interest and dividends	8b.	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	
8d. Unemployment compensation	8d.	\$1,976.00	
8e. Social Security	8e.	\$0.00	
8f. Other government assistance that you regularly receive  Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: _____	8f.	\$0.00	
8g. Pension or retirement income	8g.	\$0.00	
8h. Other monthly income. Specify: _____	8h. +	\$0.00	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,976.00	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$1,976.00	+ _____ = _____
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.			
Specify: _____		11. +	\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		12. +	\$1,976.00
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?	<input checked="" type="checkbox"/> No. <b>None.</b> <input type="checkbox"/> Yes. Explain: _____		

**Fill in this information to identify your case:**

Debtor 1	<b>Shabrena</b>	<b>Lavet</b>	<b>Lynch</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF TEXAS</b>			
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

**Official Form 106J****Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- No. Go to line 2.  
 Yes. **Does Debtor 2 live in a separate household?**  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

 No Yes. Fill out this information for each dependent.....**Dependent's relationship to Debtor 1 or Debtor 2****Dependent's age****Does dependent live with you?**Daughter15

- No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

	<u>Your expenses</u>
<b>4. The rental or home ownership expenses for your residence.</b> Include first mortgage payments and any rent for the ground or lot.	4. <u>\$1,200.00</u>
<b>If not included in line 4:</b>	
4a. Real estate taxes	4a. _____
4b. Property, homeowner's, or renter's insurance	4b. _____
4c. Home maintenance, repair, and upkeep expenses	4c. _____
4d. Homeowner's association or condominium dues	4d. _____

Debtor 1	<b>Shabrena Lavey Lynch</b>	Case number (if known)	_____
<b>Your expenses</b> _____			
<b>5. Additional mortgage payments for your residence</b> , such as home equity loans		5.	_____
<b>6. Utilities:</b>			
6a. Electricity, heat, natural gas		6a.	<b>\$50.00</b>
6b. Water, sewer, garbage collection		6b.	_____
6c. Telephone, cell phone, Internet, satellite, and cable services		(Cell Phone) 6c.	<b>\$90.00</b>
6d. Other. Specify: _____		6d.	_____
<b>7. Food and housekeeping supplies</b>		7.	<b>\$300.00</b>
<b>8. Childcare and children's education costs</b>		8.	_____
<b>9. Clothing, laundry, and dry cleaning</b>		9.	<b>\$25.00</b>
<b>10. Personal care products and services</b>		10.	<b>\$25.00</b>
<b>11. Medical and dental expenses</b>		11.	<b>\$25.00</b>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.		12.	<b>\$150.00</b>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>		13.	<b>\$25.00</b>
<b>14. Charitable contributions and religious donations</b>		14.	_____
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance		15a.	_____
15b. Health insurance		15b.	_____
15c. Vehicle insurance		15c.	<b>\$80.00</b>
15d. Other insurance. Specify: _____		15d.	_____
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		16.	_____
<b>17. Installment or lease payments:</b>			
17a. Car payments for Vehicle 1		17a.	_____
17b. Car payments for Vehicle 2		17b.	_____
17c. Other. Specify: _____		17c.	_____
17d. Other. Specify: _____		17d.	_____
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>		18.	_____
<b>19. Other payments you make to support others who do not live with you.</b> Specify: _____		19.	_____

Debtor 1 Shabrena Lavet Lynch Case number (if known) \_\_\_\_\_**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

- 20a. Mortgages on other property 20a. \_\_\_\_\_
- 20b. Real estate taxes 20b. \_\_\_\_\_
- 20c. Property, homeowner's, or renter's insurance 20c. \_\_\_\_\_
- 20d. Maintenance, repair, and upkeep expenses 20d. \_\_\_\_\_
- 20e. Homeowner's association or condominium dues 20e. \_\_\_\_\_

**21. Other.** Specify: \_\_\_\_\_

21. + \_\_\_\_\_

**22. Calculate your monthly expenses.**

- 22a. Add lines 4 through 21. 22a. \$1,970.00
- 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. 22b. \_\_\_\_\_
- 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$1,970.00

**23. Calculate your monthly net income.**

- 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$1,976.00
- 23b. Copy your monthly expenses from line 22c above. 23b. - \$1,970.00
- 23c. Subtract your monthly expenses from your monthly income.  
The result is your monthly net income. 23c. \$6.00

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No. Yes. Explain here:  
**None.**

**Fill in this information to identify your case:**

Debtor 1	<u>Shabrena</u>	<u>Lavet</u>	<u>Lynch</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

**Your assets**  
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<b>\$0.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<b>\$2,272.00</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	<b>\$2,272.00</b>

**Part 2: Summarize Your Liabilities**

**Your liabilities**  
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	<b>\$0.00</b>
---	---------------

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<b>\$0.00</b>
---	---------------

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	<b>+ \$107,073.00</b>
--	-----------------------

**Your total liabilities**

**\$107,073.00**

**Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<b>\$1,976.00</b>
---	-------------------

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<b>\$1,970.00</b>
---	-------------------

Debtor 1 Shabrena Lave Lynch Case number (if known) \_\_\_\_\_**Part 4: Answer These Questions for Administrative and Statistical Records****6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

- Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.**\$4,585.69****9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:****Total claim****From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	<b>\$0.00</b>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<b>\$0.00</b>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<b>\$0.00</b>
9d. Student loans. (Copy line 6f.)	<b>\$54,580.00</b>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<b>\$0.00</b>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+ \$0.00</b>
9g. <b>Total.</b> Add lines 9a through 9f.	<b>\$54,580.00</b>

**Fill in this information to identify your case:**

Debtor 1	<u>Shabrena</u>	<u>Lavet</u>	<u>Lynch</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Shabrena Lavet Lynch  
Shabrena Lavet Lynch, Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date 09/27/2019  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<u>Shabrena</u>	<u>Lavet</u>	<u>Lynch</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 107****Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

- Married  
 Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No  
 Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 2: Explain the Sources of Your Income****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

 No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$33,803.00</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For the last calendar year:</b>  (January 1 to December 31, <u>2018</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$52,080.00</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For the calendar year before that:</b>  (January 1 to December 31, <u>2017</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$51,190.00</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

 No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
<b>From January 1 of the current year until the date you filed for bankruptcy:</b>	<u>Unemp Comp</u>	<b>\$2,280.00</b>		
<b>For the last calendar year:</b>  (January 1 to December 31, <u>2018</u> ) YYYY				
<b>For the calendar year before that:</b>  (January 1 to December 31, <u>2017</u> ) YYYY				

Debtor 1 Shabrena Lavey Lynch Case number (if known) \_\_\_\_\_**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- No

- Yes. List all payments to an insider.

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- No

- Yes. List all payments that benefited an insider.

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- No

- Yes. Fill in the details.

Debtor 1 Shabrena Lavey Lynch Case number (if known) \_\_\_\_\_

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

#### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>Rubin &amp; Associates PC</u> Person Who Was Paid			
<u>13601 Preston Rd</u> Number Street		<u>09/17/2019</u>	<u>\$2,000.00</u>
<u>Suite 500E</u>			

Dallas      TX      75240  
City              State      ZIP Code

Email or website address \_\_\_\_\_

Person Who Made the Payment, if Not You \_\_\_\_\_

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Debtor 1 Shabrena Lavey Lynch

Case number (if known) \_\_\_\_\_

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
<b>Wells Fargo</b> Name of Financial Institution	XXXX- <u>5</u> <u>8</u> <u>3</u> <u>7</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		<u>\$205.00</u>

Number Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Debtor 1 Shabrena Lave Lynch

Case number (if known) \_\_\_\_\_

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No  
 Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- No  
 Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No  
 Yes. Fill in the details.

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)  
 A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation

- No. None of the above applies. Go to Part 12.  
 Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No  
 Yes. Fill in the details below.

Debtor 1 Shabrena Lavet Lynch Case number (if known) \_\_\_\_\_**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X /s/ Shabrena Lavet Lynch**

Shabrena Lavet Lynch, Debtor 1

Date 09/27/2019**X**

Signature of Debtor 2

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No  
 Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

<b>Fill in this information to identify your case:</b>			
Debtor 1	<u>Shabrena</u>	<u>Lavet</u>	<u>Lynch</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>NORTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

## Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
None.		

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will this lease be assumed?
None.	

Debtor 1 Shabrena Lavet Lynch Case number (if known) \_\_\_\_\_

**Part 3: Sign Below**

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Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

**X** /s/ Shabrena Lavet Lynch  
Shabrena Lavet Lynch, Debtor 1

**X** \_\_\_\_\_  
Signature of Debtor 2

Date 09/27/2019  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF TEXAS  
FORT WORTH DIVISION

IN RE: **Shabrena Lave Lynch**

CASE NO

CHAPTER **7**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 9/27/2019

Signature *Is/ Shabrena Lave Lynch*  
*Shabrena Lave Lynch*

Date \_\_\_\_\_

Signature \_\_\_\_\_

AMCA  
PO Box 1235  
Elmsford NY 10523 0935

AMCOL Systems  
PO Box 21625  
Columbia SC 29221

ATandT Bankruptcy  
1801 Valley View Ln  
Farmers Branch TX 75234

ATandT Uverse  
PO Box 5014  
Carol Stream IL 60197 5014

Attorney General  
Child Support Division, Unit 411  
10260 N Central Expwy, Ste 210  
Dallas, TX 75231

Belk Synchrony Bankruptcy  
PO Box 965060  
Orlando FL 32896

Capital One Bankruptcy  
PO Box 71083  
Charlotte NC 28272

Cascade Receivables Mgmt  
1670 Corporate Cir Suite 202  
Petaluma CA 94954

Commonwealth Financial Systems  
245 Main St  
Dickson City PA 18519

Computer Credit Inc  
PO Box 5238  
WinstonSalem NC 27113 5238

CoServ Gas  
co Revenue Recovery  
7701 South Stemmons Fwy  
Corinth TX 76210

Credence Resource Management LLC  
PO Box 2238  
Southgate MI 48195

Credit Collection Service  
PO Box 9133  
Needham MA 02494 9133

Credit Collection Services  
725 Canton St  
Norwood MA 02062

Credit Service Co  
PO Box 1120  
Colorado Springs CO 80901

Credit Systems International Inc  
1277 Country Club Ln  
Ft Worth TX 76112

Direct TV Bankruptcy Dept  
PO Box 6550  
Greenwood Village CO 80155

Diversified Consultants Inc  
PO Box 551268  
Jacksonville FL 32255

Enhanced Recovery Company LLC  
PO Box 57547  
Jacksonville FL 32241

Envision Imaging of Frisco  
PO Box 974744  
Dallas TX 75397

Firewheel Modern Dentistry  
5129 N Garland Ave Suite 700  
Garland TX 75040

First Choice Emergency Room  
PO Box 841047  
Dallas TX 75284

Flagship Credit Acceptance  
PO Box 3807  
Coppell TX 75019

Global Trust Mgmt  
PO Box 26244  
Tampa FL 33622

Grande Communications  
7701 S Stemmons  
Corinth TX 76210

IC Systems Collections  
PO Box 64378  
St Paul MN 55164 0378

Internal Revenue Service-CIO  
PO Box 21126  
Philadelphia, PA 19114

Kohls Bankruptcy  
PO Box 3004  
Milwaukee WI 53201 3004

Labcorp Attn Special Operations  
1250 Chapel Hill Rd  
Burlington NC 27217

LendMark Financial Services  
2118 Usher St NW  
Covington GA 30014

MobiLoans  
151 Melacon Rd  
Marksville LA 71351

Nationwide Insurance  
1 Nationwide Plaza  
Columbus OH 43215

Navient Correspondence  
PO Box 9500  
WilkesBarre PA 18773 9500

NCB Management  
One Allied Drive  
Trevose PA 19053

NTTA  
5900 W Plano Pkwy Suite 200  
Plano TX 75093

Pacific Dental Services  
17000 Red Hill Ave  
Irvine CA 92614

Phillips and Cohen Associates Ltd  
1004 Justison St  
Mail Stop 658  
Wilmington DE 19801 5148

PMT Solutions  
2330 130th Ave NE Suite C101  
Bellevue WA 98005

Professional Account Management LLC  
PO Box 866608  
Plano TX 75086

Progressive Leasing  
256 W Data Dr  
Draper UT 84020

Quest Diagnostics Correspondence  
PO Box 3077  
Southeastern PA 19398

Republic Bank and Trust  
601 W Market St  
Louisville KY 40202 2700

Santander Consumer USA Inc Bankruptcy  
PO Box 560284  
Dallas TX 75356 0284

Speedy Cash  
7330 W 33rd St N Suite 118  
Wichita KS 67205

State Comptroller of Public Accounts  
111 E 17th St  
Austin, TX 78774-0100

Texas Health Business Office  
500 E Border St Suite 131  
Arlington TX 76010

Texas Health Physicians Group  
PO Box 732262  
Dallas TX 75373 2262

Texas Health Resources  
500 E Border St 12th Floor  
Arlington TX 76010

Texas Medicine Resources  
PO Box 8549  
Ft Worth TX 76124 0549

Texas Workforce Commission  
TEC Bldg, Tax Dept  
Austin, TX 78778

Town of Little Elm Water  
100 W Eldorado Pkwy  
Little Elm TX 75068

U.S. Attorney General  
U.S. Department of Justice  
950 Pennsylvania Ave., NW  
Washington, DC 20530-0001

United States Attorney  
1100 Commerce  
Room 16 G 28  
Dallas, TX 75242

US Department of HUD-Title 1  
52 Corporate Circle  
Albany, NY 12203-5121

Veterans Administration  
1400 N Valley Mills Dr  
Waco, TX 76799

William T. Neary  
U.S. Trustee  
1100 Commerce Street  
Room 9C60  
Dallas, TX 75242